

ASHTON-IN-MAKERFIELD URBAN DISTRICT COUNCIL.

Medical Officer of Health's Annual Report for 1895.

Ashton-in-Makerfield,

8th February, 1896.

MR. CHAIRMAN AND GENTLEMEN,

In presenting to you my Annual Report for the twenty-second time, I beg to append, as usual, the official Tables A and B of the Local Government Board, and also Table C of the County Council.

The zymotic diseases most prevalent were Enteric Fever, with some Scarlatina and Puerperal; and of those not notifiable we had some Measles, Whooping Cough, and Diarrhoea. The general death rate as calculated upon a population of 14,849 as estimated to the middle of the year was 21·9 per 1,000, against 17·5 for the previous year; 22·3 for 1893. The mean for the decade (1885-1894) being 20·0.

The marked difference in the last year being at once evident in the causes being referred more particularly to respiratory diseases and Diarrhoea. The zymotic death rate, consequently, is a little higher—to the extent of ·8 per 1,000—being a fraction over 3·0 against 2·2, and against 4·1 in 1893. The mean for the previous decade being 2·5.

The Births registered were 698, equal to a rate per 1,000 of 47·0, against 39·7 in 1894, and 45·8 in 1893. The decade showing a mean of 42·7. C. B. R. for 1894, 29·6.

Registered Births	Males, 344	Females, 354	Total, 698
„ Deaths	„ 166	„ 160	„ 326
	178	194	372

Three persons died within the area not belonging thereto, and two persons belonging the district died outside of it, so that the net increment is 373, bringing the population as estimated to 1st January, 1896, to 14,985.

Mortality at subjoined ages: Deaths under 1 year, 141; one year and under 5, 55; total under 5, 196; 5 and under 15, 7; 15 to 35, 16; 25 to 60, 51 60 and upwards, 56; total over 5, 130; gross total, 326.

The Infantile Death Rate is 201 per 1,000, against 162 in 1894 and 200 in 1893; the mean for the previous decade being 153. This death rate, as I have often pointed out fluctuates very considerably, and as a rule its abnormal elevation is associated with a marked mortality from zymotic causes. From the subjoined table it will be seen at a glance how the infantile and zymotic rates were influenced, and to which I shall refer later.

	Age 31 days and under.	From that to under 1 year.	Total.
Measles	—	1	1
Whooping Cough ..	1	3	4
Diarrhoea ...	4	14	18
Zymotic.....	5	18	23
Wasting Diseases of Infancy	25	18	43
Convulsive ditto.	3	5	8
Tubercular Disease	4	7	11
Respiratory Disease	6	26	32
Gastro Enteritis	3	21	24
	46	95	141

Exactly one half of the Zymotic mortality being under 1 year—in fact, excepting 5 deaths from Enteric, the whole of this class of mortality has been in children under 5 years of age.

Advanced Life.—An equal number of males and females succumbed during the year over 60; the united total years being 3,950, or an average of $70\frac{1}{2}$.

The *uncertified* deaths numbered 12—four less than last year; four being referred to Coroner, but no inquest held.

Inquests.—Nine enquiries took place touching violent deaths. Two were found due to suicide (hanging, gun-shot wound), 6 accidents in connection with coal-mining; the remainder certified as due to natural causes.

Analysis of Cause of Death.—Typhoid Fever, 6 (one under and 5 over 5 years); Puerperal Fever, 4 (over 5); Erysipelas, 1 (under 5); Measles 5 (under 5); Whooping Cough, 8 (under 5); Diarrhæa, 27 (25 under 5 and 2 over 5 years); Influenza, 1 (over 5); Phthisis 22 (9 under 5 and 13 over); Respiratory Diseases, 89 (49 under, 40 over 5); Heart Disease, 13 (1 under, 12 over 5); Injuries 8 (all over 5); all others, 142 (87 under, and 45 over 5); total 326.

NOTIFICATION OF INFECTIOUS DISEASE AND ITS MORTALITY SINCE ADOPTION OF ACT.

<i>Schedule of Act.</i>		1890	1891	1892	1893	1894	1895	1890	1891	1892	1893	1894	1895
Smallpox	.....	—	...	—	...	12	...	—	...	—	...	1	...
Cholera	.....	—	...	—	...	—	...	—	...	—	...	—	...
Diphtheria	.....	1	...	1	...	1	...	3	...	3	...	4	...
Membr. Croup	.....	1	...	1	...	—	...	9	...	3	...	1	...
Erysipelas	.....	10	...	11	...	32	...	36	...	22	...	14	...
Scarlet Fever	—.....	53	...	79	...	113	...	174	...	41	...	10	...
Continued Fevers	Typhus	.....	—	...	—	...	—	...	1	...	—	...	—
	Typhoid	.....	15	...	11	...	44	...	29	...	25	...	32
	Relapsing	.....	—	...	—	...	5	...	—	...	—	...	—
	Continued	.....	28	...	2	...	13	...	9	...	7	...	6
	Puerperal	.....	—	...	4	...	5	...	16	...	2	...	7
		108	109	213	288	104	74	21	...	8	...	22	...
Not in Schedule	Measles	.....	10	...	7	...	13	...	3	...	2	...	5
	Diarrhœa	.....	10	...	6	...	11	...	34	...	13	...	27
	Pertussis	.....	1	...	10	...	10	...	7	...	7	...	8
		42	...	31	...	56	...	76	...	36	...	51	...

Sickness during the year.—**Scarlet Fever.**—Ten cases occurred from June to December, but it was all of a mild type, and was widely incidental in character. One (June) at Downall Green, and one removed to hospital from Edge Green Lane. September, two of one family, 27, Beech Tree Houses, and one at Town Green. October, one at 12, Beech Tree Houses; two at Ashton Heath commencing same time next door to each other, evidently from same source of infection. December, one near St. Helens boundary, Hollen Hey, most probably imported, and the only instance where Inspector reported sanitary defect, viz., drain, and the last at Gerard Street.

Erysipelas.—Seven cases of idiopathic and seven of traumatic origin were enquired into, but the Nuisance Inspector reported a satisfactory condition of the surroundings in every instance:

Diphtheria.—February, one at Beech Tree Houses, where there was great overcrowding, one at a farm at Brockstedes in July, where drainage was all wrong. Two cases in one house, Billinge Lane, in September. The farm has been redrained on modern principles; and the house last named is without water supply.

Membr. Croup was reported once only—in a small illventilated cottage (no through ventilation) in a court off Gerard Street.

Measles.—Of which I have only record of the mortality seems to have been most frequent during the first three-fourths of the year. 1st quarter, 2 deaths; 2nd quarter, 2 deaths; 3rd quarter, 1 death.

Puerperal Fever.—Of seven cases recorded four proved fatal—a heavy mortality relatively. Their incidence was such that in April I stopped a certified midwife in Haydock from attending for a time any case in our township, and warned the M.O.H. for that district. In May I had to adopt the same course of procedure with regard to an uncertified woman in Ashton, and I am glad to say no case has been reported since.

Typhoid and Continued Fevers still prevailed endemically to the middle of November, and from its incidence it will be seen some of its old haunts were conspicuous. In *January* at 86, Bolton Road. *February* at Gillacre Lane End (Bolton Road). *April*, Whitehill Street, Far Cross. *May*, Town Green, Bolton Road. *June*, 76, Stubshaw Cross. *July*, 5, Druid Street, Ashton Heath. At the end of this month a sequence of cases cropped up at South View, Long Lane, first at No. 12. *August*, two cases removed from No 15 to hospital but turning out non-infectious illness; two at No. 9, of which one died (*aged 21 months*); at No. 15 another person notified was found walking about; one at No. 11, and at No. 16 a female notified was found following her usual avocations. In *September* another at No. 9; a “continued” at No. 8. *October*, a “contined” at No. 10. On inspection and enquiry complaints were made of smell from man-hole; and a general dirty filthy condition of back premises with accumulation of both fresh and stagnant sewage, and a foul condition of gullies was observed. Going back to August a case was reported at 18, Edge Green Street, while at North End off Park Lane we had one in September, one in October, and one in November, (open ash-pits and inattention thereto). *September*, at Garswood Road, complaints of smell from man-hole—a second case at Spindle Hillock, Downall Green, near sewage plot, reported as foul and offensive, and a third at 48, Rectory Road. 78, Toothil Street, with defective gulley; 8, Druid Street, Ashton Heath, with untrapped drain, and another at Wigan Road, near Seven Stars, defective drain. All appeared similarly crowded; and on October 2nd a case occurred at Park Lane, and milk supplied by retail. On November 2nd a sequence of six cases commenced, which upon enquiry, elicited the fact of milk snpply being at the root of them. The milk it was admitted to the Nuisance Inspector and myself had been brought from the shippsons, and nn-wittingly exposed during the course of the illness, and in compliance with request fortunately the sale was stopped for a period of three weeks, since which time no case has occurred in that neighbourhood. Dnring this month also a case occurred at Ashton Heath at property notified in previons years—and a case imported from Leigh to Bolton Road (fatal); with another notified at Stubshaw Cross, removed to hospital, but discharged non-infective, after careful watching. Two cases further continued at Stone Croft Terrace in village, at new property in Wigan Road, followed by one from same house on 30th December, removed to hospital but fonnd also not to be typhoid after watching.

Of the total number originally notified, four sent to Hospital were after careful watching discharged as non-infectious cases. Two of the notifications being withdrawn, and two cases reported in very young children were also withdrawn.

The subjoined ages during the past 4 years were as follows:—

		1—5		5—15		15—25		25—60		Total.
1892	...	3	...	15	...	12	...	13	...	43
1893	...	1	...	5	...	10	...	11	...	27
1894	...	1	...	11	...	11	...	7	...	30
1895	...	4	...	9	...	9	...	16	...	38 minus 6 referred to

in preceding paragraph: the mortality has decreased on the average of three previous years being 0·4 per 1000, which is about twice that of a passable or probably unavoidable rate (0·2). It is obvious, however, that in the fnture strict attention must be given to active remedial measures if we are to bring down this death rate to the minimum.

Diarrhœa and Gastro-Enteritis were very prevalent and contributed largely to the mortality. The former being a prominent symptom of the latter, and both caused by similar influences—predisposing and exciting. The period of dentition renders children peculiarly susceptible to these ailments, and they often assume an epidemic form in Summer and Autumn. As I pointed out in my monthly report for August the direct exciting causes of Diarrhœa are, food in excess, or of improper quality, as meats, fish, sour unripe fruit and vegetables, tainted, decomposed, or imperfectly masticated—the products of indigestion passing prematurely into the intestines. The acute form is very common in hand-fed children, the result of fermentation of milk before or after ingestion, the irritant here being undigested caseine.—Defective Hygienic conditions also, such as damp,

cold, dark, illventilated dwellings—the foul emanations from filthy accumulations, especially of decaying organic matter, sewage, or fœcal collections. In a memorandum issued, the outcome of my report, attention was drawn to “Preventive Measures,” amongst which was that of *Absolute Cleanliness*, both of body, clothing, and surroundings. From careful enquiry into such class of sickness I am more than satisfied of improper feeding, and the ingestion of most unsuitable things (as I then instanced) are great factors in augmenting such sickness.

Respiratory disease was much above the average, affecting both children and adults—the month of November being very conspicuous for mortality therefrom. The death rate from this cause being 6·0 per 1000, or nearly double that for either of the two previous years, and against an average of 4·35 for 4 preceding years. Apart from influences over which we have no control such as natural dampness of subsoil, and effects from variable climatic causes—the cold wet sloppy condition of yards, singly and in common, being unpaved and of irregularity in surface leading to objectionable pools of water, often being contaminated with house slops and refuse; the muddy condition of the back streets and approaches generally, and of new streets, or rather ways intended for streets, have their influence also in inducing catarrhal affections, croup, rheumatism, neuralgia, and respiratory diseases. These matters I have for some years brought before your notice, and striking evidence can be obtained any ordinary season of rain to make the remedy commendable to all interested in the comfort and health of the people.

With one exception, I think I have attended all the ordinary Sanitary meetings, as well as special ones, advising and reporting results of periodic visits of different parts of the township on matters affecting public health, and on matters referred to me in regard to plans and the like. The following forms a brief summary thereof.

Insanitary arrangement of bakehouses and privies at Stubshaw Cross—rejection of plan for proposed slaughter houses in Bolton Road—defective closet accommodation at Lodge Lane—condemnation of a bakehouse at Garswood (which, through party interested being threatened with legal proceedings, have since been remedied—the flowing of sewage over road at Station Road, Garswood—insufficient and insanitary closet accommodation at Chapel street—to frequent complaints made about the removal of pail contents, and leakage into the streets during transit—reported property at Brynn Fields very bad, insanitary, and requiring early attention—to bad case of overcrowding in Gennell, off Gerard Street—the frequency of smoke nuisances from firing of chimneys in total disregard of notices placarded throughout the district as to penalties, &c.—to diarrrhœa with the advent of summer heat, and its causes, advising a house to house distribution of handbills as to best preventive measures (copy annexed)—to overcrowding, explaining the attendant difficulties where all were members of same family, but advising, when otherwise immediate action to have abatement—emphasizing the necessity for some temporary steps at least to be adopted with the nuisance *re* sewage plot at Spindle Hillock—insanitary condition of property at Lower Lane (structural and otherwise)—to questionable efficiency of ventilation of main sewers (referred to Surveyor and myself, as yet incomplete)—to condition of yards and approaches to property—to inefficiency of ventilation (inadequate window area and no back doors) at Downall Green, and at same block percolation of water into back places from higher ground at back—structural and other sanitary defects at old property, Town Green—dirty filthy house at Brynn Gate.

There has been no occasion to take any steps under the Offensive processes of trade, Bakehouses, or Workshops Acts, or Food & Drugs Acts; but I have just received an Official Memorandum from the Chief Inspector under the latter, to the effect that the Sanitary aspects of all Factories and Workshops are under the control of your Council, and that the M.O.H. is expected to work in touch with District Inspectors in regard to this part of the new Act. Under the Public Health Act, however, we have had to deal summarily in two instances—in the first I seized say about three barrowfuls of putrid fish and had it destroyed, one of the defendants decamping, but the other being sent to prison for a month without the option of a fine. The second case was that of the thorax of a cow sadly tuberculosed—but beautifully stripped to the bone, shewing a cultivated acquaintance with the *modus operandi*. The details of evidence moreover in this case illustrated the range of distance, and the great deceit, to which slink meat dealers will go, that the public, and especially the poorer section, may be robbed of their money, and very often their health. Perhaps the full penalty this time of three months' imprisonment will act as a deterrent to the gentleman in future.

In the course of the year I brought before your notice the question of a Refuse Destructor, but finding the cost so enormous, and cognisant of heavy expenditure in regard to sewerage and other matters, it was abandoned for a time.

The cottages at Brynn Fields, the back to back houses in North Street, and the insanitary property at Ashton Heath have given a considerable amount of prolonged trouble and annoyance to your Council in seeking their remedy, but now there is substantial evidence of something being accomplished.

The question of scavenging has led to the purchase of two new pail vans.

The Hospital has had to be bolted up during the year, since which time I have not been able to find any further evidence of subsidence. It is in good order and well attended to.

I must congratulate your Council on the very marked energy and attention which, severally and collectively, it has bestowed during the year on important matters bearing upon essential relations to the health of its people, and the sanitary improvement of the district. That of sewage and its disposal has been predominant, and I do think this an opportune time for observing that *it has been and is* our anxious endeavour to discharge satisfactory effluents from our works both at Brynn Gates and the Farm. There should be a decided improvement at the former when land filtration is superadded, and at the Farm, from my observations along with that Special Committee, I should hope to see a much better effluent than formerly, judging from the additional labour and care taken to secure it. At both places, it seems to me, most regular and stringent supervision continue to be given to find out any weak points in the respective treatments.

With regard to work done during the year, your *Surveyor* reports—"That new sewers have been laid at Church Street, off Rectory Road, draining 26 houses which formerly polluted the brook and dam at Downall Green; at Spindle Hillock, near Railway Bridge—the sewage from six houses formerly running on to the adjacent land has been connected with that which discharges on to the Lowe bank sewage plot. That about 300 yards of the main sewer near Ashton Heath has been opened and cleansed from sediment prior to delivery on Sewage farm. At the Sewage farm the use of chemicals has been adopted in the precipitation tanks—making all tanks tight and converting them to the 'continuous flow system,' further, the provision of wash-out pipes and sludge pits, resulting in an improvement of the effluent. Council's decision to require a separate system of drainage to new properties as plans for same come before them, where the levels of public sewers permit—each house to have its own drain, trap and ventilator to main drains laid in back street. Detailed reports on Sewage farm from Mr. Newton and the Surveyor received special deliberation in February. An important item is the improvement of Brynn Road—now in progress."

In this connection your Medical Officer is reminded of Mr. Netten Radcliffe's report of 1872, in which he describes the township as "one with well ordered roadways." There can be little doubt but that the Council has for some time taken an active interest in maintaining such efficiency. The road referred to here is of considerable length, and as good, dry, well drained main roads have an indirect bearing on public health, its completion will be hailed with satisfaction.

Water Supply.—Mr. Hodgkinson continues, "great attention has been paid to cleansing of the filter beds, and to flushing of the mains. He has received no complaint as to quality, and believes same was never more satisfactory." From the minutes I gather that during the year 18,853,000 gallons of Liverpool water in addition had been consumed, equal to 3·8 gallons per head per day.

He, as well as the Nuisance Inspector and myself, refers to the necessity of having new streets permanently formed with impervious material.

The Nuisance Inspector's summary of nuisances dealt with consisted of:—

Stopped defective drains and gullies	...	...	...	...	...	98
Defective cottage spouting, &c.	...	...	...	...	...	11
Overcrowding	...	...	...	...	...	6
Foul and delapidated ashpits	...	...	...	...	...	5
Keeping pigeons in a bedroom	...	...	...	...	...	1
Foul well, 1; dirty cowsheds, 4	...	...	...	...	...	5
Cowsheds with insufficient light and ventilation	...	...	...	...	...	2
Do. deficient drainage	...	...	...	...	...	3
Rooms fumigated	...	...	...	...	...	47
Do. limewashed	...	...	...	...	...	3
						Total, 181

And he reports, "slaughter houses have been regularly inspected and generally found clean and in good order. Dairies and cowsheds have been inspected, and with few exceptions have been found clean and in good order.

A considerable improvement has been made in cowsheds during past two years. Infectious disease occurred in two cases in the houses of cowkeepers, one at Park Lane, where sale of milk was stopped. The other at

Booth's Brow. At this, a farm, the drains were found in a very bad condition, the water supply was from a well in lower part of yard, contaminated by surface drainage from stable and piggery. Drains were put in order at once, well filled up, and water from mains put in. The condition of the private and back streets are the same as reported last year, no attempt being made to carry away the surface water, and during wet weather many of them are a perfect sea of mud. The majority of the yards are unpaved or flagged, and a number have just a paved passage leading from the back door to the back yard gate, and during wet weather their condition is somewhat similar to the back streets, the tenants in many instances placing the house refuse in the yards and streets with a view to improving them, which only makes matters worse. Section 23 of Public Health Amendment Act gives Local Authorities power to make bye-laws with reference to paving of yards and open spaces."

In conclusion, I have a fairly big request for the future; hence my reason for suggesting a detailed report of each house which comes under observation through notification of infectious disease. I am confident it will lead to good results, as I am equally confident of the interior cleanliness of many houses being deficient—to overcrowding—over density in many houses seems to exist. Then with regard to back-to-back houses I found some more last week. The fact of more than a double rent being required must not be lost sight of—to the benefit of the owner—but to the ill health more probably of the tenant's family. The provision of slop stones at several blocks. I do not see from the Inspector's report any reference to the re-construction or alteration or remedying in any way of the very numerous old privy middens which I referred to in my last annual report. These, as have been so frequently referred to both by myself and government inspectors, are an inestimable source of danger. To the unsatisfactory condition of house yards, approaches to property and side streets, I must once more ask your attention. The facility and economy of scavenging is connected with it. This is in itself a great question, but it must be admitted to be one worthy the interest of your Council. With regard to scavenging *per se* can it not be practical for a large portion to be done in the night? Reverting too, for a moment to the old privies could we not in some instances resort to water carriage? Last September, twelve months' special inspection by your Board and myself was given to illventilated, crowded *cul de sacs* down Gas Street. May I hope that the confirmation of that report may soon be acted upon? Several old buildings have gone to ruin, and some erased for new dwellings, but still some exist which although not otherwise bad, have too little means for ventilation, especially of the sleeping rooms; the windows small and inadequate, and not always opening from top. It has been a frequent mental observation of mine how very little, or in what few instances, we see bedroom windows opened to purify these rooms after the night's occupation!

Associated with the means for prevention or check of infectious disease; first, we have been unable to acquire an ambulance from a financial aspect; I should like in my next reference to be able to state the fact of our possessing one. Secondly, we ought to have a disinfecting apparatus. A very good one in the market now is that invented by Dr. Thresh; price from £50 upwards, which from what I have read seems satisfactory in its efficiency and simpleness of working. All these matters, gentlemen, I submit for future consideration and attention.

During the past 21 years it has been my endeavour (however feeble it may have proved) through the medium of my annual reports, to diffuse some knowledge on the lines and conditions essential to the happiness and comfort of our population—since these are absolutely and without doubt dependent upon the amount of health which can be maintained. With the education now of our times it is to be sincerely hoped that the inhabitants of each and every locality will see that it is due from them on the one part to promote and encourage cleanliness in every sphere of domestic life—that they even, can make their own surroundings bad, and that in return, bad surroundings are prejudicial to themselves, as well as to others; and on the other part, it is due from Authorities to control and manage things prejudicial, which they and they only can do. It is for an interest in the national welfare of the whole community that renders State medicine necessary. For example—pure air is a necessity of health, but as an individual may not have control over the air which he is bound to breathe into his lungs. He may be powerless to prevent other persons from contaminating this air, and thereby striking at the very foundation of his health and happiness. Here, as in so many other cases which demand regulation of the conduct of individuals, the State steps in for the protection of the citizen, and enacts rules which shall be binding upon all.

Self-interest really indicates that the best course is, that we should do for our neighbours as for ourselves.

I beg to remain, Sir and Gentlemen,

Your obedient Servant,

NATHAN HANNAH,
F. Inc. S. of M.O.H.'s.

